

TEMP RETURN SERVICE REQUESTED

Date: 12/19/12



SANDRA PARISEAU

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Welcome to our Sleep Apnea Supply Program.

SANDRA PARISEAU,

Congratulations and Welcome to Med-Care Diabetic & Medical Supplies sleep apnea supply program. Your insurance has been accepted and your free membership has been approved! Med-Care has been a nationally recognized provider for Medicare, Medicaid and over 1,000 private insurance companies since 1999. We are dedicated to assisting our patients with their needs, while providing the nation's best service available.

Based on your conversation with one of our intake professionals, your sleep apnea supply prescriptions have been sent to the following physician:

Dr. LEE WESLER

REDACTED

If the physician above is not your correct physician, please call customer service at (888) 777-0737.

When we receive your prescription, your Personal Patient Advocate will contact you. They will answer any questions you may have regarding our program, your forthcoming order and supplies, the documents you received in this package, as well as any other questions you may have. We will not ship any products until you have received this call and spoken to us personally. The number we have to reach you is

If this is not the correct number, please call us immediately.

Our Mission is clear:

- Provide the highest quality of service
- Offer premium products
- Save our members as much money as we can
- Support members with counseling and informative newsletters

Please visit our website at http://www.medcareinc.com or call us anytime.

Together with Med-Care, Let's Live a Healthier and Better Life! Med-Care Diabetic and Medical Supplies Inc.



MED-CARE DIABETIC & MEDICAL SUPPLIES, INC. 933 CLINT MOORE ROAD

BOCA RATON, FL. 33487

Phone: (888) 777-0737

Date: 12/19/12



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SANDRA PARISEAU	J ,	V (100.3
I received instructions as receiving as being either a	nd understand that Medicare defines the a capped rental or an inexpensive or routinely purch	item that I will be
FOR CAPPED REN	TAL ITEMS:	
of the equipment i After ownership of the responsibility to and Examples of this type	monthly rental fee for a period not to exceed 13 most transferred to the Medicare beneficiary. The equipment is transferred to the Medicare beneficiary for any required equipment service or repair of equipment include: 10 10 20 30 30 30 30 30 30 30 30 30 30 30 30 30	ficiary, it is the beneficiary's
FOR INEXPENSIV	E OR ROUTINELY PURCHASED ITEMS:	
rentals cannot exc. • Examples of this type	etegory can be purchased or rented; however, the to eed the fee schedule purchase amount. e of equipment include: ose Monitors, Walkers, and Seat Lift Mechanisms.	tal amount paid for monthly
I understand that unless Routinely Purchased item	otherwise stated I will be renting the Capped Rent s above.	al items and purchasing the
If you would like to opt ou at 888-777-0737 or select l	nt, please contact us before your shipment is sent, below:	
Purchase Option	Rental Option	
Thank You and we look fo	orward to supplying you!	
Beneficiary Signat	ure Date	



TEMP RETURN SERVICE REQUESTED

SANDRA PARISEAU

CT

REDACTED

ID#

Date: 12/20/2012

Dear SANDRA PARISEAU,

We have been unable to reach you with regard to your sleep apnea supplies. Our company is currently holding your prescription from **Dr. LEE WESLER**. We need to speak with you as soon as possible to ship your order. Please call us at (888) 492-3701 today so we may send you your requested supplies.

We have been trying to reach you at

, please call us now at

(888) 492-3701.

Thank you and we look forward to hearing from you,

Med-Care Diabetic & Medical Supplies Inc. 933 CLINT MOORE ROAD BOCA RATON, FL 33487 Phone: (888) 492-3701